

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Yoshihiro SASAKI, et al.
Title: PROBE TESTING METHOD AND APPARATUS FOR
DETERMINING ACCEPTABLE/DEFECTIVE END SHAPE OF
CONTACT PROBE THROUGH IMAGE ANALYSIS
Appl. No.: Unassigned
Filing Date: August 20, 2003
Examiner: Unassigned
Art Unit: Unassigned



UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Yoshihiro SASAKI
Takashi NISHIKAWA

Enclosed are:

- [X] Application Data Sheet (37 CFR 1.76) (3 pages)
- [X] Specification, Claim(s), and Abstract (76 pages).
- [X] Informal drawings (11 sheets, Figures 1-4, 5a, 5b, 6, 7a, 7b, 7c, 7d, 7e, 7f, 7g, 8a, 8b, 9a, 9b, 10-13).
- [X] Unexecuted Declaration and Power of Attorney (3 pages).
- [X] Claim for Convention Priority.

The filing fee is calculated below:

| | Claims as Filed | Included in Basic Fee | Extra Claims | Rate | Fee Totals |
|---|--------------------|--------------------------|-----------------|-------------------|---------------|
| Basic Fee | | | | \$750.00 | \$750.00 |
| Total Claims: | 48 | - 20 | = 28 | x \$18.00 | = \$504.00 |
| Independents: | 5 | - 3 | = 2 | x \$84.00 | = \$168.00 |
| If any Multiple Dependent Claim(s) present: | | | | + \$280.00 | = \$0.00 |
| Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee | | | | + \$130.00 | = \$130.00 |
| | | | | SUBTOTAL: | = \$1552.00 |
| [] Small Entity Fees Apply (subtract ½ of above): | | | | | = \$0.00 |
| | | | | TOTAL FILING FEE: | = \$1,552.00 |

- [] A check in the amount of \$0.00 to cover the filing fee is enclosed.
- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: August 20, 2003

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Customer Number: 22428



22428

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